



DEPARTMENT OF THE ARMY
HEADQUARTERS, 15TH REGIMENTAL SIGNAL BRIGADE
FORT GORDON, GEORGIA 30905-5729

REPLY TO
ATTENTION OF:

ATZH-TB (310-2d)

26 July 2005

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Policy Letter 27: Brigade GSA Vehicle Procedures

1. References:

a. AR 58-1, Management, Acquisition, and Use of Motor Vehicles, dtd 15 Mar 99.

b. Fort Gordon Installation Transportation Motor Pool Standard Operation Procedures (SOP) of General Services Administration (GSA) vehicles.

2. This policy letter establishes uniform procedures for the usage of GSA vehicles.

3. This policy letter applies to all personnel assigned or attached to 15th Regimental Signal Brigade.

4. General:

a. Unit commanders, staff sections, and Brigade Transportation Coordinators are responsible for the safe operation, maintenance, and utilization of the Brigade's assigned vehicles and will-

(1) Ensure that all vehicles are dispatched by the 10th of each month.

(2) Ensure that all vehicles dispatched to their organizations are used only for official purposes, as defined in AR 58-1, and that the vehicle keys and credit cards are controlled at all times in accordance with (IAW) local Physical Security Plan.

(3) Ensure that preventive maintenance procedures are followed. Vehicles are to be returned to the Installation Transportation Motor Pool (ITMP) for scheduled service and maintenance on the date specified by motor pool official.

(4) Take appropriate disciplinary action when drivers abuse/misuse vehicles.

(5) Ensure vehicles are parked in approved parking areas and are secured when they are not being used.

(6) Ensure that accident reporting procedures are adhered to IAW Installation Transportation Motor Pool policy.

b. A report is submitted on each vehicle's mileage. Vehicles with less than 300 miles used for the month can lead to removal of vehicle from the brigade.

5. Procedures:

a. The vehicle operator is responsible for his/her vehicle, to include its care, maintenance, and safe operation. He/she must ensure the government's vehicle is safeguarded and protected while it is in his/her possession. Each operator will:

(1) Conduct a before and after inspection of the vehicle using the 15th Signal Brigade Vehicle Check Sheet. (See encl 1) You must annotate any discrepancies you find with the vehicle prior to departure.

(2) Be responsible for their vehicle, to include the passenger and cargo, until commitment is officially terminated. Unless specifically authorized, you cannot drive a GSA vehicle more than 100-mile radius from Fort Gordon.

(3) Ensure the vehicle is secured whenever it is left unattended, windows rolled up, keys removed from ignition, and doors locked.

(4) Park vehicle in authorized areas only. The following areas are restricted: Snack bars, clubs, commissary, and main exchange parking lots. Also, government vehicles are not authorized to be parked in residential areas.

(5) Adhere to good driving practices such as:

(a) Obeying all traffic signs and speed limits.

(b) Maintaining proper following distance.

(c) Obeying rules of the road, to include local traffic laws.

(d) Driving defensively.

(e) Not operating a cellular phone while driving.

(f) Not smoking in the GSA vehicle.

(g) Not wearing earphones while driving, IAW AR 385-55, para. 2-6.

(h) Wearing seat belt at all times and ensuring that passengers do the same, IAW AR 385-55, para 2-16.

(i) Keep head gear on while driving.

(j) Not eating or drinking while driving.

(6) Take immediate action to notify the Military Police and Transportation Motor Pool of all accidents. Record all information on SF 91 (Operator's Report of Motor Vehicle Accident, encl 2) and DD Form 518 (Accident Identification Card, encl 3). Accident instructions are provided in the dispatch logbook.

(7) Notify the ITMP (791-3196/2338) for on-post recovery. For off-post assistance with breakdown and recovery, contact the Regional Maintenance Control Center (RMCC), at 1-888-622-6344 for service authorization in excess of \$50.00. Drivers are authorized to pay up to \$50.00 on the credit card for emergency service/repair. Wait in a safe area until help arrives.

(8) The operator is responsible for ensuring that the vehicle is returned clean. A vehicle washing and cleaning facility is provided by the ITMP. Wash brushes, cleaning supplies, and industrial vacuum cleaner are available at the ITMP during operational hours.

6. The unauthorized or willful misuse of an Army-owned or controlled motor vehicle may be cause for disciplinary actions under the Uniform Code of Military Justice or adverse administrative action.

3 Encls

1. 15th RSB Vehicle Checklist

2. SF 91

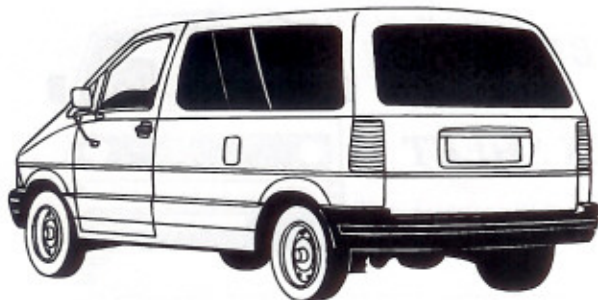
3. DD 518



LORI L. SUSSMAN
COL, SC
Commanding

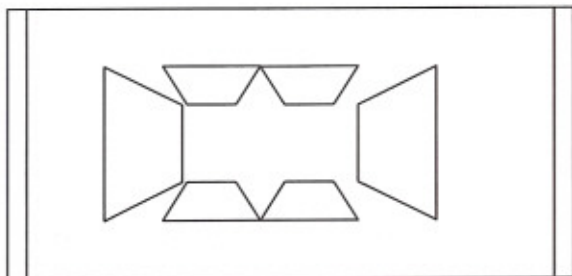
DISTRIBUTION:

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15TH REG SIG BDE

VEHICLE CHECK SHEET



ADDITIONAL REMARKS:

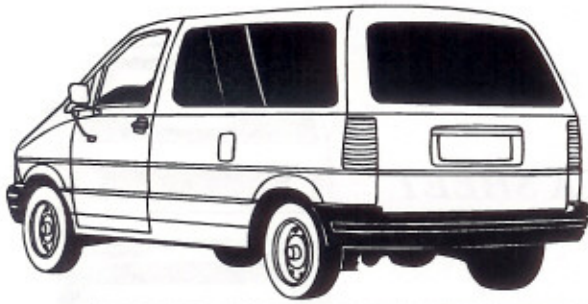
NOTE: SOLDIERS WILL BE RESPONSIBLE FOR NOTING ANY DISCREPANCIES AND NOTIFYING THE XO/S4 . IF YOU FAIL TO CHECK YOUR VEHICLE AND THE NEXT DRIVER FINDS SOMETHING WRONG, YOU COULD BE HELD RESPONSIBLE.

VEHICLE INSPECTION					
B= BENT D= DENTED F= FLAT S= SCRATCHED L= LOOSE I= INOPERABLE CR= CRACKED M= MISSING BLD= BALD N= NONE T= TORN ST= STAINED					
PART	DEFECT	OK	PART	DEFECT	OK
RADIATOR LEVEL			TRUNK LID		
OIL LEVEL			SEATBELTS		
HEAD LIGHTS			GAS CAP		
PARKING LIGHTS			TIRES INCL SPARE		
TURN SIGNALS			EXHAUST PIPE		
BACKUP LIGHTS			FIRE EXTINGUISHER		
BRAKE LIGHTS			LUG WRENCH		
TAIL LIGHTS			HEATER		
DASH LIGHTS			HORN		
SPEEDOMETER			RADIO ANTENNA		
MIRRORS			HUB CAPS		
FRONT BUMPER			GRILLE		
WINDSHIELD			HOOD		
LF FENDER			RF FENDER		
LF DOOR PANEL			RF DOOR PANEL		
LF DOOR GLASS			RF DOOR GLASS		
LR DOOR PANEL			RR DOOR PANEL		
LR FENDER			RR FENDER		
REAR BUMPER			REAR GLASS		
UPHOLSTREY			JACK AND HANDLE		
GLOVE COMPARTMENT					

VEH BUMPER #: _____ DATE: _____

BEFORE
 NAME: _____ SIGNATURE: _____

AFTER
 NAME: _____ SIGNATURE: _____



15TH REG SIG BDE
VEHICLE CHECK SHEET



All Drivers will adhere to good driving practices such as:

- **Obeying all traffic signs and speed limits**
- **Maintaining proper following distance**
- **Obeying rules to the road, to include local traffic laws**
- **Driving defensively**
- **Not operating a cellular phone while driving**
- **Not smoking in the GSA vehicle**
- **Not wearing earphones while driving, IAW AR 385-55, para 2-6**
- **Keep headgear on while driving**
- **Not eating or drinking while driving**

SAMPLE SF 91

MOTOR VEHICLE ACCIDENT REPORT	Please read the Privacy Act Statement on Page 3.	INSTRUCTIONS: Sections I thru IX are filled out by the vehicle operator. Section X, items 72 thru 82c are filled out by the operator's supervisor. Sections XI thru XIII are filled out by an accident investigator for bodily injury, fatality, and/or damage exceeding \$500.
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SECTION I - FEDERAL VEHICLE DATA

1. DRIVER'S NAME (Last, first, middle)		2. DRIVER'S LICENSE NO./STATE/LIMITATIONS		3. DATE OF ACCIDENT	
4a. DEPARTMENT/FEDERAL AGENCY PERMANENT OFFICE ADDRESS					4b. WORK TELEPHONE NUMBER ()
5. TAG OR IDENTIFICATION NUMBER	6. EST. REPAIR COST \$	7. YEAR OF VEHICLE	8. MAKE	9. MODEL	10. SEAT BELTS USED <input type="checkbox"/> YES <input type="checkbox"/> NO
11. DESCRIBE VEHICLE DAMAGE					

SECTION II - OTHER VEHICLE DATA (Use Section VIII if additional space is needed.)

12. DRIVER'S NAME (Last, first, middle)		13. DRIVER'S LICENSE NUMBER/STATE/LIMITATIONS	
14a. DRIVER'S WORK ADDRESS		14b. WORK TELEPHONE NUMBER ()	
15a. DRIVER'S HOME ADDRESS		15b. HOME TELEPHONE NUMBER ()	
16. DESCRIBE VEHICLE DAMAGE		17. ESTIMATED REPAIR COST \$	
18. YEAR OF VEHICLE	19. MAKE OF VEHICLE	20. MODEL OF VEHICLE	21. TAG NUMBER AND STATE
22a. DRIVER'S INSURANCE COMPANY NAME AND ADDRESS		22b. POLICY NUMBER	
23. VEHICLE IS <input type="checkbox"/> CO-OWNED <input type="checkbox"/> RENTAL <input type="checkbox"/> LEASED <input type="checkbox"/> PRIVATELY OWNED		24a. OWNER'S NAME(S) (Last, first, middle)	
25. OWNER'S ADDRESS(ES)		24b. TELEPHONE NUMBER ()	

SECTION III - KILLED OR INJURED (Use Section VIII if additional space is needed.)

26. NAME (Last, first, middle)	27. SEX	28. DATE OF BIRTH
29. ADDRESS		
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> 30. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN </div> <div style="width: 20%;"> 31. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2) </div> <div style="width: 30%;"> 32. LOCATION IN VEHICLE </div> <div style="width: 20%;"> 33. FIRST AID GIVEN BY </div> </div>		
34. TRANSPORTED BY		35. TRANSPORTED TO
36. NAME (Last, first, middle)		37. SEX
38. ADDRESS		38. DATE OF BIRTH
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> 40. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN </div> <div style="width: 20%;"> 41. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2) </div> <div style="width: 30%;"> 42. LOCATION IN VEHICLE </div> <div style="width: 20%;"> 43. FIRST AID GIVEN BY </div> </div>		
44. TRANSPORTED BY		45. TRANSPORTED TO
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 46. Pedestrian a. NAME OF STREET OR HIGHWAY </div> <div style="width: 55%;"> b. DIRECTION OF PEDESTRIAN (SW corner to NE corner, etc.) FROM TO </div> </div>		
c. DESCRIBE WHAT PEDESTRIAN WAS DOING AT TIME OF ACCIDENT (Crossing intersection with signal, against signal, diagonally, in roadway playing, walking, hitchhiking, etc.)		

SAMPLE DD FORM 518

DD FORM 518

ACCIDENT-IDENTIFICATION CARD	
<i>(THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974-SEE REVERSE)</i>	
Any correspondence regarding accident should be addressed to:	
MAKE REFERENCE TO	
DATE OF ACCIDENT	
MAKE AND TYPE OF VEHICLE	
REGISTRATION NO.	
DRIVER <i>(Last name-first name-initial)</i>	
SSN	GRADE
ORGANIZATION	

DD FORM 518 1 OCT 78 PREVIOUS EDITION
IS OBSOLETE.